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- VACCINATION AND THE BATTLE AGAINST POLIO:
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A PUBLIC HEALTH TRIUMPH

4 ABSTRACT

5 Polio, once a devastating global disease-causing paralysis and death, has been largely controlled

6 through widespread vaccination efforts. This article highlights the critical role of immunization

7 in public health, focusing on India's remarkable journey toward polio eradication. From the

8 introduction of the Oral Polio Vaccine (OPV) in 1978 to the nationwide Pulse Polio campaign in

9 1995, India's dedicated efforts culminated in being declared polio-free by the WHO in 2014. The

10 piece also outlines the virology, transmission, diagnosis, and lack of cure for poliovirus,

emphasizing prevention through vaccination. Despite global progress, poliovirus remains a threat in regions like Afghanistan and Pakistan, underscoring the need for continued vigilance and

in regions like Afghanistan and Pakistan, underscoring the need for continu
 immunization to prevent resurgence and ensure a polio-free future.

14 One of the most poignant tools in public health is vaccination, which involves administering a

vaccine to help the body develop impunity against specific contagious conditions. Vaccines

16 contain inactivated or weakened forms of a contagion or bacteria(antigens), which spark the

vulnerable system to respond without causing the factual illness. This process equips the body to

defend itself if exposed to the complaint in the future, thereby precluding illness, complications,

19 and indeed death. Historically, vaccines have played a vital part in controlling and barring deadly

20 conditions similar as measles, tuberculosis, smallpox, and polio. wide immunization not only

21 protects individualities but also helps communities through herd impunity, where enough people

are vaccinated to limit the spread of a complaint. This has led to significant advancements in

- 23 public health issues, including increased life expectation and a decline in complaint frequency.
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25 INDIA'S JOURNEY TOWARD POLIO ERADICATION

26 India's sweats to exclude polio involved several mileposts and major challenges. The process

began in the 1970s with early vaccination sweats and moved forward with the launch of the

Universal Immunization Programme(UIP) in 1985. A turning point came with the palpitation

Polio Immunization (PPI) crusade, initiated in 1995, which aimed to administer the Oral Polio

- Vaccine(OPV) to all children under the age of five, anyhow of their previous vaccination status.
- The last case of wild poliovirus in India was reported in West Bengal in 2011. Following this, in

32 2014, the World Health Organization(WHO) declared India officially polio-free. This

achievement was the result of an extraordinary public crusade involving door- to- door

vaccination sweats and special immunization days known as "Polio Sundays", icing that no

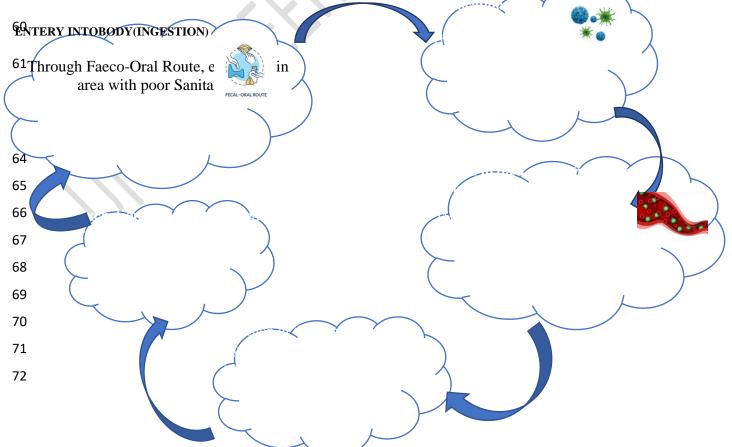
35 child was left vulnerable. India's polio elimination is regarded as one of the topmost public

36 health successes encyclopedically.

37 A BRIEF HISTORY OF POLIO AND ITS VACCINES

- 38 Poliomyelitis, or polio, was once among the most feared diseases worldwide, especially for
- children. It caused **paralysis**, **disability**, **and in severe cases**, **death**. In the **1940s and early**
- 40 **1950s**, countries like the United States experienced devastating outbreaks. Hospitals were
- 41 overwhelmed, and the "iron lung"—a mechanical ventilator used to assist breathing—became a
- 42 symbol of the crisis.
- 43 A breakthrough came in **1952** when **Dr. Jonas Salk**, an American virologist, developed the
- 44 Inactivated Polio Vaccine (IPV) using killed poliovirus. His vaccine was a major advancement
- 45 because it did not carry any risk of causing polio. After a historic clinical trial involving over 1.8
- 46 million children, the vaccine was declared safe and effective in **1955**, leading to mass
- 47 vaccination efforts.
- 48 Later, in the early 1960s, Dr. Albert Sabin introduced the Oral Polio Vaccine (OPV) using a
- 49 weakened live virus. This version was cheaper, easier to administer, and more effective in
- 50 halting the spread of the virus by generating immunity in the gut. OPV became the primary
- vaccine used globally after successful testing in countries such as the Soviet Union and official
- 52 approval in the U.S. in **1961**.
- 53 In India, **OPV was introduced in 1978** as part of the **Expanded Programme on Immunization**
- 54 for children under one year of age. The **Universal Immunization Programme in 1985** further
- strengthened routine vaccination efforts. However, it was the **1995 launch of the Pulse Polio**
- 56 **campaign** that truly accelerated mass immunization by aiming to reach **every child, regardless**
- 57 of previous vaccine history.
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59 LIFE CYCLE OF POLIO VIRUS



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76 Poliovirus (PV) is one of the best-characterized positive-strand RNA viruses that belongs to

the *Enterovirus* genus of the *Picornaviridae* family. PV is classified within the *Enterovirus*

78 *C* species, and there are three wild PV serotypes: WPV1, WPV2 and WPV3 [$\underline{2}$]. Enteroviruses

79 are mainly transmitted by the faecal–oral and respiratory routes. They initially replicate in the

gastrointestinal or respiratory epithelium and can then spread to other tissues and organs via the
 lymphatic system and bloodstream [3]. PV can reach the central nervous system (CNS), mainly

the spinal cord, destroying motor neurons and causing acute paralytic poliomyelitis in rare cases

and then excreted out through feces and transmission to others.

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86 EPIDEMIOLOGICAL TRIAD FOR POLIOVIRUS:

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	rus, Infects the gastrointestinal tract; in AGENT	
	ses, invades the central nervous system	
ana	I destroys motor neurons, leading to	
	paralysis.	
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96	HOST	ENVIRONMENT
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97	Susceptible Population: Mainly children under	
98	5 years of age, though unvaccinated individuals	
50	of any age are at risk.	
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101 POLIO DIAGNOSIS AND TREATMENT

Healthcare professionals frequently identify polio grounded on symptoms similar as muscle
 weakness, stiffness in the neck or back, or abnormal revulsions. Laboratory testing of a coprolite
 sample is the most dependable system to confirm the presence of the poliovirus. Although the
 contagion can occasionally be set up in throat hearties, this is only possible during the first week

- 106 of infection, making it a less dependable individual tool. There's presently no cure for polio. The
- 107 only effective strategy is forestallment through immunization. The polio vaccine, when given in
- 108 multiple boluses, provides lifelong protection. Since the launch of the Global Polio Eradication
- 109 Initiative in 1988, it's estimated that over 20 million people have been spared palsy, and roughly
- 110 1.5 million nonage deaths have been avoided due to vitamin A supplements handed alongside
- vaccination. Although polio- convinced palsy is endless, certain curatives can help ameliorate
- 112 quality of life. These include physical remedy, heat treatment, and muscle relaxants, which help
- strengthen affected muscles and reduce discomfort, indeed though they can not reverse the
- 114 damage

115 Global and Regional Threats

- 116 Vaccination remains the **key defense against the return of polio**. If strategic vaccination efforts
- are not maintained, the virus could resurge. Currently, **wild poliovirus still circulates in parts**
- 118 of Afghanistan and Pakistan, posing a threat of reintroduction to polio-free countries like India.
- 119 Failure to stop polio in these remaining regions could result in **up to 200,000 new cases**
- 120 **annually worldwide** within a decade.
- 121 That is why **continued vigilance and immunization** are essential—to **protect future**
- 122 generations and finally eliminate polio forever.

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